## STATE OF NEW HAMPSHIRE

## 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

## PLEASE PRINT

RECEIVED

1110	LEASE LKIINI		
I. Name of Lobbyist(s	Robert L. Best		JUL 1 9 2018
•	partnership, firm or corporation	, if any:	NEW HAMPSHIRE DEPARTMENT OF STATE
Sulloway 8	& Hollis, P.L.L.C.		
	e of partnership, firm or corporation)	·	
9 Capitol S	Street, Concord, NH 03301		
Business Address: (Stre	eet) (Town/Cit	ty) (State)	(Zip Code)
(603) <u>224-2341</u> (Telephone)	(603) 226-2404	e-mail <u>rbest@</u> (Fax)	sulloway.com
	vers: (Choose one – file separate r ansactions which are not attributa		nay file a separate report for
☐ All reportable trans	actions occurring in the months price	or to the reporting date relative to	the following client:
New H	Iampshire Auctioneers Associ		
OR	(Full Name of Client as it appears on t	he Lobbyist Registration Form)	
	actions by the lobbyist (including th lar client.	e lobbyist's family), or the lobbying	ng firm listed below which are
IV. Date of Report Reports cover: activ	April 25, 2018   ty from date of registration to 3/31/18	July 25, 2018 <b>[V</b> activity from 4/1/18 to 6/30/1	8
·	October 31, 2018  activity from 7/1/18 to 9/30/18	January 30, 2019 ☐ activity from 10/1/18 to 12/3	
	no fees received and no report complete just this form and submit it		
VI. Check if additiona	al reports are attached:		
☐ If you have receive	ed fees or made expenditures, you m	nust file Addendum A- Fees and	Expenses
Expense Reimburseme		•	•
☐ If you, your firm, o	or your family has made political co	ntributions, you must file Addend	lum C- Political Contributions
and complete to the be	SA 15-B, RSA 14-C and RSA 664 a st of my knowledge and belief.	and hereby swear or affirm that the $\frac{\gamma \left( \gamma \right) \left( 8\right) }{\sqrt{18}}$	e foregoing information is true
(Signature of lobbyist)		(D	ate)
Robert L. Best (Print Name of lobby)	st)		